

**191—76.3(84GA,HF597) External review request.** Except for requests for expedited review, the covered person or the covered person's authorized representative shall send a request for external review (completed Appendix B) in writing, by mail, by fax or by electronic transmission, including a copy of the health carrier's written notice containing the final adverse determination, to the commissioner within the time periods specified in 2011 Iowa Acts, House File 597, section 7(1) or 9(1), as applicable. The request form and notice shall be sent to the commissioner at Insurance Division, 330 Maple Street, Des Moines, Iowa 50319; fax (515)281-3059; or E-mail [iid.marketregulation@iid.iowa.gov](mailto:iid.marketregulation@iid.iowa.gov).  
[ARC 9637B, IAB 7/27/11, effective 7/8/11]